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# DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration  
Submitted  
With Initial  
Filing

OR

Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number

10217.01

First Named Inventor

James Moshier

COMPLETE IF KNOWN

Application Number

Filing Date

October 7, 2003

Art Unit

Examiner Name

## I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Method and Apparatus for Forming Multi-Sided Containers

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>


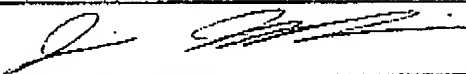
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2] 4

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**DECLARATION — Utility or Design Patent Application**


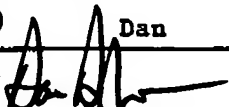
Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: 		OR <input type="checkbox"/> Correspondence address below	
Name <b>Mark D. Miller</b>		<b>25265</b> <small>PATENT TRADEMARK OFFICE</small>	
Address <b>Kimble, MacMichael &amp; Upton</b> <b>5260 N. Palm Ave., Ste. 221</b>			
City <b>Fresno</b>	State <b>CA</b>	ZIP <b>93704</b>	
Country <b>USA</b>	Telephone <b>(559) 435-5500</b>	Fax <b>(559) 435-1500</b>	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) <b>James</b>		Family Name or Surname <b>Moshier</b>	
Inventor's Signature 		Date <b>10-07-03</b>	
Residence: City <b>Reedley</b>	State <b>CA</b>	Country <b>USA</b>	Citizenship <b>USA</b>
Mailing Address <b>1949 E. Manning Ave.</b>			
City <b>Reedley</b>	State <b>CA</b>	ZIP <b>93654</b>	Country <b>USA</b>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) <b>Dan</b>		Family Name or Surname <b>Djokovic</b>	
Inventor's Signature		Date	
Residence: City <b>Indianapolis</b>	State <b>Indiana</b>	Country <b>USA</b>	Citizenship <b>USA</b>
Mailing Address <b>3540 Hollow Run Circle # 322</b>			
City <b>Indianapolis</b>	State <b>Indiana</b>	ZIP <b>46214-5081</b>	Country <b>USA</b>
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

PTO/SB/01 (06-03)

Approved for use through 07/31/2003. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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City <b>Fresno</b>		State <b>CA</b>		ZIP <b>93704</b>	
Country <b>USA</b>		Telephone <b>(559) 435-5500</b>		Fax <b>(559) 435-1500</b>	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any)) <b>James</b>		Family Name or Surname <b>Moshier</b>			
Inventor's Signature					Date
Residence: City <b>Reedley</b>	State <b>CA</b>	Country <b>USA</b>	Citizenship <b>USA</b>		
Mailing Address <b>1949 E. Manning Ave.</b>					
City <b>Reedley</b>	State <b>CA</b>	ZIP <b>93654</b>	Country <b>USA</b>		
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any)) <b>Dan</b>		Family Name or Surname <b>Djokovic</b>			
Inventor's Signature 					Date <b>6th October 2003</b>
Residence: City <b>Indianapolis</b>	State <b>Indiana</b>	Country <b>USA</b>	Citizenship <b>USA</b>		
Mailing Address <b>3540 Hollow Run Circle # 322</b>					
City <b>Indianapolis</b>	State <b>Indiana</b>	ZIP <b>46214-5081</b>	Country <b>USA</b>		
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the <u>1</u> supplemental sheet(s) PTO/SB/02A or 021R attached hereto.					

<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet
Page <u>4</u> of <u>4</u>	

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Dan		Nourian	
Inventor's Signature <i>Dan Nourian</i>		Date <i>10.7.03</i>	
Residence: City	Reedley	State	CA
		Country	USA
Mailing Address			
1949 E. Manning Ave.			
Mailing Address			
City	Reedley	State	CA
		Zip	93654
		Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
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Mailing Address			
City		State	
		Zip	
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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	
Filing Date	October 7, 2003
First Named Inventor	James Moshier
Title	Method and Apparatus for Forming
Art Unit	Multi-Sided Containers
Examiner Name	
Attorney Docket Number	10217-01

Thereby appoint:

☒ Practitioner(s) of Customer Number:

25265

PATENT TRADEMARK OFFICE

OR

☐ Practitioner(s) named below:

Name	Registration Number
Mark D. Miller	32277

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Mark D. Miller				
Address	Kimble, MacMichael & Upton				
Address	5260 N. Palm Ave., Ste. 221				
City	Fresno	State	CA	Zip	93704
Country	USA				
Telephone	(559) 435-5500	Fax	(559) 435-1500		

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/95)

SIGNATURE of Applicant or Assignee of Record

Name	James Moshier		
Signature			
Date	October 7, 2003	Telephone	(559) 638-8484

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 3 forms are submitted

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/81 (06-03)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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Art Unit	Multi-Sided Containers
Examiner Name	
Attorney Docket Number	10217.01

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/95)

## SIGNATURE of Applicant or Assignee of Record

Name	Dan Djokovic		
Signature			
Date	October 6th, 2003	Telephone	(559) 638-8484

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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Filing Date

October 7, 2003

First Named Inventor

James Moshier

Title

Method and Apparatus for Forming

Art Unit

Multi-Sided Containers

Examiner Name

Attorney Docket Number

10217.01

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Practitioners at Customer Number:



OR



Practitioner(s) named below:

25265

PATENT TRADEMARK OFFICE

Name	Registration Number
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Firm or Individual Name

Mark D. Miller

Address

Kimble, MacMichael &amp; Upton

Address

5260 N. Palm Ave., Ste. 221

City

Fresno

State

CA

Zip

93704

Country

USA

Telephone

(559) 435-5500

Fax

(559) 435-1500

I am the:



Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Dan Nourian		
Signature			
Date	October 7, 2003	Telephone	(559) 638-8484

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\*Total of 3 forms are submitted.

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